OFFICE OF EXECUTIVE INSPECTOR GENERAL For the Agencies of the Illinois Governor

EMPLOYMENT APPLICATION

PLEASE PRINT LEGIBLY OR TYPE INFORMATION.

1.	TITLE OF POSITION APPLYING FOR			LOCATION: Springfield Chicago_					
2.					L SECURITY NUMBER				
	Last	First	Middle						
3.	ADDRESS			COUNTY		BIRTHDA	ATE	Optional	
	CITY		STATE	ZIP CODE	но	ME PHON	NE	•	
	WORK PHONE	DRIVERS L	ICENSE NUMBER	<u> </u>	:	STATE	EXP. D	ATE	
4.	If your answer to any of the fo	ollowing questions is	s "yes" please attacl	n a signed detailed	l explanation.				
	A. Have you ever been fired from	om a job?				Ye	es	No	
	B. Have you ever pled guilty to Pursuant to Public Act 93 Effective August 12, 2004, of Illinois are not obligated expunged juvenile record. Public Act applies to law 6	-0211, effective Janu (705 ILCS 405/5-91 d to disclose an arre Employers may no	nary 1, 2004, (20 IL 5(8a)), respectively st or conviction rec at ask if an applican	CS 2630/12(a)) and applicants seeking ord that has been that has had records	d Public Act 9 ng employmen expunged or expunged or	93-0912, nt with the S sealed, nor sealed. Nei	an ther	No	
	C. Are you currently in default State law provides that any and in the amount of \$600 c the maker or guarantor of the	employee who is in our more shall, as a con	lefault on the repaym	nent of any education		eriod of six		No nore	
5.	TECHNICAL/PROFESSIONAL LICENSENUMBER								
	STATE ISSUED	DATE ISSU	ED (MO/YR)	EX	XPIRATION I	DATE (MO	0/YR)		
6.	EDUCATION REPORT: LISt required during the hiring process.	TION REPORT: LIST YOUR EDUCATION ACCURATELY AND COMPLETELY. Proof of education/training will be luring the hiring process.							
	NAME AND ADD SCHOOL/COLLEG BUSINESS/TRA	E/UNIVERSITIES/	AI	MAJOR (DO NOT BBREVIATE)	DATES AT From MO/YR	To	DEGRE	ND DATE OF E EARNED MO/YR	

work backward. If you l	nce high school/college or last 10 y have an extensive work history with additional space is needed, attach a	one employer list each	change in payroll title separate			
EMPLOYERADDRESS						
TELEPHONE	TITLE		EMPLOYMENT DATES:		_TO_	
DESCRIBE DUTIES AND	RESPONSIBLITIES:			MO/YR		MO/YR
REASON FOR LEAVING	<u> </u>		FINAL S2	ALARY		
EMPLOYER		ADDRESS_				
TELEPHONE	TITLE		EMPLOYMENT DATES:	MO/YR	_TO_	MO/YR
DESCRIBE DUTIES AND	RESPONSIBLITIES:					
REASON FOR LEAVING	,		FINAL SA	ALARY_		
	TOTAL T					
	RESPONSIBLITIES:			MO/YR	_10_	MO/YR
REASON FOR LEAVING	<u> </u>		FINAL S2	ALARY		
EMPLOYER		ADDRESS_				
TELEPHONE	TITLE		EMPLOYMENT DATES:	MO/YR	_TO_	MO/YR
DESCRIBE DUTIES AND	RESPONSIBLITIES:			MO/YR		MO/YK
REASON FOR LEAVING			FINAL SA	ALARY		

8.	The Office of Executive Inspector General asks employees to make a one-year commitment to the OEIG, if hired. Are you willing to make a one-year commitment? Yes No
9.	PERSONAL STATEMENT:
	The position for which you have applied <i>requires</i> submission of a written personal statement of no more than one (1) page on the following topic:
	The OEIG is responsible for ensuring and maintaining integrity in state government, please explain what integrity means to you and how your skills and/or experiences will help this office achieve its mission. Please attach the statement to your application.
	Failure to submit a personal statement renders your application incomplete.
10	I understand that I may be required to submit proof of previous employment, military service or other statements in thi application. I authorize release of this and other information covering job-related factors for the purpose of verification and determination of suitability for state employment. I certify that the information on this application is true and accurate an understand that any misrepresentation may be grounds for ineligibility or termination of employment.
	I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the employer may discharg employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written documentation or by conduct unless such change is specifically acknowledge in writing by an authorized executive of this organization.
	In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.
	WRITTEN SIGNATURE REQUIRED DATE

ADDITIONAL INFORMATION:

8.

- State law requires that you furnish certain information about your child support obligations at the time you are hired. The possibility of employment is not affected by a child support obligation or default in payment.
- As a condition of employment, state law requires that "every male born on or after January 1, 1960, and less than 27 years old, shall submit documentation at time of appointment, evidencing his registration with the Federal Selective Service System.
- In compliance with the state and federal constitutions, the Illinois Human Rights Act, the U.S. Civil Rights Act, the Americans with Disabilities Act, and Section 504 of the Federal Rehabilitation Act, the Office of Executive Inspector General does not discriminate in employment, contracts, or any other activity. If you have a complaint, please contact the Office of Executive Inspector General at 312/814-5600 (voice) and 800/524-8794 (TTY).

The State of Illinois is an Equal Opportunity Employer. We invite you to complete the following. Completion of this information **IS NOT REQUIRED.** This information is being requested solely for purposes of complying with state and federal affirmative-action laws. Circle **ONE** letter.

FEMALE	MALE	
A	G	White not of Hispanic Origin. A person having origins in any of the original peoples of Europe, North Africa or the Middle East.
В	Н	African American not of Hispanic Origin. A person having origins in any of the black racial groups of Africa.
С	J	Native American . A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community.
D	K	Asian. A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.
E	L	Hispanic . A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish Culture or origin, regardless of race.